

**RECEIVED  
CENTRAL FAX CENTER****JUN 03 2005****BEYER WEAVER & THOMAS, LLP****INTELLECTUAL PROPERTY LAW**

590 W. El Camino Real, Mountain View, CA 94040  
Telephone: (650) 961-8300 Facsimile: (650) 961-8301  
www.beyerlaw.com

**FACSIMILE COVER SHEET**

June 3, 2005

**Receiver: SORKIN, DAVID L - Group Art Unit 1723****TEL #:****FAX # : (703) 872-9306****Sender: Alan S. Hodes****Our Ref. No.: BONJP001D1****Re: - 10/802,365****Pages Including Cover Sheet(s): 2****MESSAGE:**

Please see attached REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT  
AND CHANGE OF CORRESPONDENCE ADDRESS.

**CONFIDENTIALITY NOTE**

The information contained in this facsimile (FAX) message is legally privileged and confidential information intended only for the use of the receiver or firm named above. If the reader of this message is not the intended receiver, you are hereby notified that any dissemination, distribution or copying of this FAX is strictly prohibited. If you have received this FAX in error, please immediately notify the sender at the telephone number provided above and return the original message to the sender at the address above via the United States Postal Service. Thank you.

JUN. 3. 2005 10:46AM

16509618301

RECEIVED  
CENTRAL FAX CENTER  
NO. 271 P. 2  
JUN 03 2005

PTO/SB/83 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

|                        |                   |
|------------------------|-------------------|
| Application Number     | 10/802,365        |
| Filing Date            | 03-16-2004        |
| First Named Inventor   | GLUCKSMAN, Dov Z. |
| Art Unit               | 1723              |
| Examiner Name          | SORKIN, DAVID L   |
| Attorney Docket Number | BONJP001D1US      |

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 22434


**NOTE:** This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☐ Change the correspondence address and direct all future correspondence to:
- ☒ The address associated with Customer Number: 30480

**OR**

|  |   |                  |              |
|--|---|------------------|--------------|
| <input type="checkbox"/> Firm or Individual Name |   |                  |              |
| Address  |   |                  |              |
| City   | State   | Zip              |              |
| Country  |   |                  |              |
| Telephone  | Email   |                  |              |
| Signature  |  |                  |              |
| Name   | Aven S. Hodes   | Registration No. | 38, 185      |
| Date   | June 3, 2005  | Telephone No.    | 650-961-8300 |

**NOTE:** Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.